

F 0000	INITIAL COMMENT	F 0000
	<p>Based on a Revisit Survey completed on December 13, 2022, it was determined that Westmoreland Manor corrected all the federal deficiencies cited during the survey of November 3, 2022, under the requirements of 42 CFR Part 483, Subpart B, Requirements for Long Term Care Facilities.</p>	

(X6) DATE:

This form is a printed electronic version of the CMS 2567L. It contains all the information found on the standard document in much the same form. This electronic form once printed and signed by the facility administrator and appropriately posted will satisfy the CMS requirement to post survey information found on the CMS 2567L.



# Certified End Page

**WESTMORELAND MANOR**

**STATE LICENSE NUMBER: 231002**

**SURVEY EXIT DATE: 12/13/2022**

**I Certify This Document to be a True and Correct Statement of Deficiencies and  
Approved Facility Plan of Correction for the Above-Identified Facility Survey**

A handwritten signature in black ink that reads "Jeane Parisi".

*Jeane Parisi*  
*Deputy Secretary for Quality Assurance*

A handwritten signature in black ink that reads "Debra L. Bogen MD".

*Debra L. Bogen, MD, FAAP*  
*Acting Secretary of Health*



THIS IS A CERTIFICATION PAGE

**PLEASE DO NOT DETACH**

THIS PAGE IS NOW PART OF THIS SURVEY